

| POSITION                  | INITIALS  | ID NO. | DATE    |
|---------------------------|-----------|--------|---------|
| FEE DETERMINATION         | <i>JS</i> | 7531   |         |
| O.I.P.E. CLASSIFIER       | <i>JS</i> | 3      | 2/15    |
| FORMALITY REVIEW          |           | 700017 | 3-20-00 |
| RESPONSE FORMALITY REVIEW |           |        |         |

Best Available Copy

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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